



Release Form for Employment Verification

Employee Name (Print) _____ Today's Date _____

Social Security Number _____ - _____ - _____ DOB: _____

Phone Number: _____

Please indicate personal information to be released:

- Salary, Rate of Pay
 - Dates of Employment
 - Job Title
 - Other, please explain _____
- _____

I, _____, authorize Global Contract Professionals, Inc. Payroll Department to release the above employment information, without liability to:

Via Mail: Company: _____

Name of Contact Person: _____

Address: _____

City, State zip code: _____

Via Fax: _____

Via Email: _____

Signature of Employee **Date**

Please Allow **3-5 business days** depending on the day form is received. When your signed release form has been received, the Global Payroll Department, will write a letter on company letterhead with your personal information that you have instructed us to release and who to send it to. **To ensure prompt response, please complete and sign the form entirely, an incomplete release form can delay your verification of employment process.**

Send form to Global Payroll Department: **Fax:** 817-232-5861

Email: Verifications - verifications@teamglobal.com

Global Technical Services, Inc.

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